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**APPLICANTS**

Dirk Heinrich Tegtmeier, Berlin, GERMANY;  
 Kristian Bernhard Wittjen, Berlin, GERMANY;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP03/11093 10/07/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/21/2007

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

Thomas H. Osborn  
 Otis Elevator Company  
 10 Farm Springs  
 Farmington, CT06032

**TITLE**

ELECTRICAL ELEVATOR RESCUE SYSTEM

<b>FILING FEE RECEIVED</b> 1330	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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